

Department of Forensic Science
Breath Alcohol Section
Instrument Location History
1/1/1990 To 2/13/2015

LMS
TLN

Instrument Serial Number: 012049

As of 13-Feb-15

Start Date	End Date	Agency Name
12-Feb-15		DFS Central Lab
28-Aug-14	12-Feb-15	Suffolk PD
20-Aug-14	28-Aug-14	DFS Central Lab
05-Mar-14	20-Aug-14	Danville PD
26-Nov-13	05-Mar-14	DFS Central Lab
21-Feb-12	26-Nov-13	Chesterfield County PD
04-Feb-11	21-Feb-12	DFS Central Lab

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Site Specification: No detrimental environmental conditions exist. ☒

Measurement Assurance Check

Standard (sea level)	PA Target	minimum	maximum	Sample 1	0.098
0.100	0.099	0.096	0.102	Sample 2	0.098
Precision		sample min	sample max	Sample 3	0.098
0		0.098	0.098		

Supplies
Mouthpieces
Certificates of Analysis
Operator Worksheet
Other:

DFS Document 250-F113
Revision 7
Page 1 of 2

Instrument Serial Number

012049

Certification Date

02/13/15

☐ Calibrated☐ Certified☒ Measurement Assurance Check☒ Instrument Test☐ Troubleshooting/Maintenance Worksheet Completed

(Successful completion denotes satisfactory condition of the item.)

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.250		0.000	0.000	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.150		0.000	0.000	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.080		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.020		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

All measurements are in g/210L

Estimation of Uncertainty of Measurement and traceability records are located within the Breath Alcohol Section

DFS Technician

Heath W. Starch

Date

2/13/15

Issuing Analyst

T. J. [Signature]

Date

2/13/15

JPD

AMS
TLN




COMMONWEALTH OF VIRGINIA
DEPARTMENT OF FORENSIC SCIENCE

CERTIFICATE OF BLOOD ALCOHOL ANALYSIS
AS DETERMINED BY A CHEMICAL TEST OF THE ACCUSED'S BREATH

NAME OF ACCUSED INSTRUMENT, TEST,	NAME OF COURT DFS
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BREATH ANALYSIS

SAMPLE EXAMINED AND TEST CONDUCTED BY STANTON, HEATHER, M		AGENCY DFS Central Lab
DFS LICENSE NUMBER 18910	LICENSE EXPIRES 10/01/2016	DATE TEST CONDUCTED 02/12/2015
TEST EQUIPMENT NUMBER 012049		

RESULTS: TIME SAMPLE TAKEN 11:26 EST
SAMPLE'S ALCOHOL CONTENT Sequence GRAMS PER 210 LITERS OF BREATH

ATTEST:

I CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF THE TEST CONDUCTED; THAT THE TEST WAS CONDUCTED WITH THE TYPE OF EQUIPMENT AND IN ACCORDANCE WITH THE METHODS APPROVED BY THE DEPARTMENT OF FORENSIC SCIENCE; THAT THE TEST WAS CONDUCTED IN ACCORDANCE WITH THE DEPARTMENT'S SPECIFICATIONS; THAT PRIOR TO ADMINISTRATION OF THE TEST THE ACCUSED WAS ADVISED OF HIS RIGHT TO OBSERVE THE PROCESS AND SEE THE BLOOD ALCOHOL READING ON THE EQUIPMENT USED TO PERFORM THE BREATH TEST, AND THAT I POSSESS A VALID LICENSE TO CONDUCT SUCH TEST, GIVEN UNDER MY HAND THIS _____ DAY OF _____, 20 _____.

BREATH TEST OPERATOR

☐ I HAVE RECEIVED A COPY OF THIS CERTIFICATE OF ANALYSIS _____
SUBJECT'S SIGNATURE

☐ SUBJECT REFUSED TO SIGN FOR COPY OF CERTIFICATE OF ANALYSIS _____
OPERATOR'S SIGNATURE

LMS
TLW




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DFS LICENSE NUMBER 18910	LICENSE EXPIRES 10/01/2016	DATE TEST CONDUCTED 02/12/2015
TEST EQUIPMENT NUMBER 012049		

RESULTS: TIME SAMPLE TAKEN 11:34 EST

SAMPLE'S ALCOHOL CONTENT 0.00 GRAMS PER 210 LITERS OF BREATH

ATTEST:

I CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF THE TEST CONDUCTED; THAT THE TEST WAS CONDUCTED WITH THE TYPE OF EQUIPMENT AND IN ACCORDANCE WITH THE METHODS APPROVED BY THE DEPARTMENT OF FORENSIC SCIENCE; THAT THE TEST WAS CONDUCTED IN ACCORDANCE WITH THE DEPARTMENT'S SPECIFICATIONS; THAT PRIOR TO ADMINISTRATION OF THE TEST THE ACCUSED WAS ADVISED OF HIS RIGHT TO OBSERVE THE PROCESS AND SEE THE BLOOD ALCOHOL READING ON THE EQUIPMENT USED TO PERFORM THE BREATH TEST, AND THAT I POSSESS A VALID LICENSE TO CONDUCT SUCH TEST, GIVEN UNDER MY HAND THIS _____ DAY OF _____, 20_____.

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SUBJECT'S SIGNATURE

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OPERATOR'S SIGNATURE



IntoxNet MIS Report

Report Generated 12 Feb 2015 at 12:05

TZ
LMS
JLW

Test Results

Instrument Serial Number 012049

Test # 002188 Subject Test

Test Location 1 Department of
Test Date 12 Feb 2015

Test Location 2 Forensic Science
Test Time 11:28
Remote/Local Local

Test Location 3
System Check Passed

Operator's Last Name STANTON
Agency DFS Central Lab

Operator's First Name HEATHER

Operator's Middle Initial IV

Card Serial Number 118910

License Number 18910

Effective Date 10/01/2014

Expiration Date 10/01/2016

Subject's Last Name INSTRUMENT

Subject's First Name TEST

Subject's Middle Initial

Subject's Date of Birth 00/00/0000

Subject's Sex Male

Driver's License Number

Driver's License Expiration 00/00/0000

Driver's License State

Court Name DFS

End Date 12 Feb 2015 End Time 11:35

Result Time 11:34

Result Date 12 Feb 2015 Result 0.00

Data Type DIAG

Sample Value Pass

Sample Time 11:28

Data Type BLK

Sample Value 0.000

Sample Time 11:29

Data Type CHK

Sample Value 0.099

Sample Time 11:30

Data Type BLK

Sample Value 0.000

Sample Time 11:31

Data Type SUBJ

Sample Value 0.000

Sample Time 11:32

Data Type BLK

Sample Value 0.000

Sample Time 11:33

Data Type SUBJ

Sample Value 0.000

Sample Time 11:34

Data Type BLK

Sample Value 0.000

Sample Time 11:35

Standard Type Dry Gas Std

Standard Value 0.100

Standard Lot Number AG316301-29

Standard Expiration Date 06/12/2015

Tank Pressure 531

Barometric Pressure 756 mmHg

Blow Sample Number 1 Blow Duration 3.45 sec

Blow Volume 1725 cc End-of-Blow Time 11:32

Blow Sample Number 2 Blow Duration 3.61 sec

Blow Volume 1742 cc End-of-Blow Time 11:34

Tamper Evident Stamp 30bcf1fe

Test Status Code 0

Test Status Success

LMB
TLN

Intox EC/IR-II: Accuracy Check

Department of Forensic Science

Serial Number: 012049 Test Number: 2189

Test Date: 02/12/2015 Test Time: 11:42 EST

Dry Gas Target: 0.099

Lot Number: AG316301-29 Exp Date: 06/12/2015

Tank Pressure: 526 psi Barometric Pressure: 755 mmHg

System Check: *Passed*

Test	g/210L	Time
BLK	0.000	11:43
CHK	0.098	11:44
BLK	0.000	11:46
CHK	0.098	11:46
BLK	0.000	11:48
CHK	0.098	11:48

Test Status: *Success*

Calibration CRC: 9740404D

AMS
TLN

Intox EC/IR-II: Accuracy Check

Department of Forensic Science

Serial Number: 012049 Test Number: 2190

Test Date: 02/12/2015 Test Time: 11:51 EST

Dry Gas Target: 0.298

Lot Number: AG428003-04 Exp Date: 10/07/2016

Tank Pressure: 276 psi Barometric Pressure: 755 mmHg

System Check: *Passed*

Test	g/210L	Time
BLK	0.000	11:52
CHK	0.301	11:52
BLK	0.000	11:54
CHK	0.301	11:55
BLK	0.000	11:56
CHK	0.301	11:57

Test Status: *Success*

Calibration CRC: 9740404D

Department of Forensic Science
Breath Alcohol Section
Trouble Call Log
2/11/2015 To 2/11/2015

Instrument Serial Number: 012049

MMB
022416
this
2/24/15
11/2/24/15
24-Feb-15

Date: 11-Feb-15 Time: 10:00 PM Remote: True Tech: MMB (26417) Location: Suffolk PD

Indication: OPERATOR QUESTION / COMMENT

Problem: INSTRUMENT DISPLAYING CERTIFICATION WARNING.

Technician Response: SITE VISIT CONDUCTED. INSTRUMENT FUNCTIONING PROPERLY.

Resolution NO FURTHER ACTION REQUIRED
